

ISSUE SLIP STAPLE AREA (for additional cross references)

| LOCATION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | 89 | | 4-18-01 |
| O.I.P.E. CLASSIFIER | | 49 | 5/11/01 |
| FORMALITY REVIEW | ST | 1021 | 06/06/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|----------|
| Final Original | |
| 1 | 3/17/01 |
| 2 | 10/31/01 |
| 3 | 5/6/01 |
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| Claim | Date |
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| Final Original | |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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